Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION **TRANSMITTAL**

ADDI ICATION EL EMENTO		Mall Stop Patent Application	30	
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	EU920432923US	- (2) (4)	
TRANSMITTAL	Title	DENTAL MIRROR SCRATCH RES	0	
UTILITY PATENT APPLICATION	First Inventor	C. NATAY-CURLEY		
	Attorney Docket No.			
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See MPEP	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Commissi	Independent Application July 1450 a VA 22313-1450		
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages 37] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description		7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies			
- Claim		ACCOMPANYING AF	PLICATION PARTS		
5. Oath or Dec a. V Ne b. Co (for i. Appl. 18. If a CONTI specification for CONTINUAT 5b, is considere	popy from a prior application (37 CFR 1.63(d)) or continuation/divisional with Box 18 completed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Dilication Data Sheet. See 37 CFR 1.76 INUING APPLICATION, check appropriate box, and supplication to title, or in an Application Data Sheet under 3 cinuation Divisional Continuation	10. 37 CFR 3.73(b) Statement (when there is an assign English Translation Doct Information Disclosure Statement (IDS)/PTO-14 13. Preliminary Amendment Return Receipt Postcard (Should be specifically it Certified Copy of Priority (if foreign priority is claim Nonpublication Request (b)(2)(B)(i). Applicant muor its equivalent. 17. Other:	Attorney ument (if applicable) Copies of IDS (449 Citations I (MPEP 503) temized) Document(s) ned) under 35 U.S.C. 122 ust attach form PTO/SB/35 Id in the first sentence of the on No.:60/453474		
		DENCE ADDRESS			
Custon	mer Number:	OR Corres	spondence address below		
Name	CINDY J. NATAY-CURLEY				
Address	4545 SOUTH MISSION ROAD, SPACE 29				
City	TUCSON	State ARIZONA	Zip Code 85746-2322		
Country	US T	elephone 520-434-8385	Fax		
Name (Print/Ty	VDE) CINDY J. NATAY-CURLEY	Registration No. (Attorney/Agent)			
Signature	Michael Walack	1-	Date 03/09/04		

This collection of information is replaced by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 1/22 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Name (Print/Type)

Signature

(\$)	3	85.	00
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Complete if Known			
Application Number			
Filing Date	03/09/2004		
First Named Inventor	C. NATAY- Curley		
Examiner Name	-		
Art Unit	Duntal Mirror Scratch Resistant		
Attorney Docket No.			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	e 3. ADDITIONAL FEES					
Deposit Account:	Large E					
Deposit		Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account Number	1	130	2051		Surcharge - late filing fee or oath	1 CC Y AIG
Deposit Account	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812 2	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	ļ
Charge fee(s) indicated below, except for the filing fee	1805 1	840*	1805	1 840*	Requesting publication of SIR after	
to the above-identified deposit account.	1	,		.,0.0	Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Pee Paid Code (\$) Code (\$)	1254 1	,480	2254	740	Extension for reply within fourth month	
1001 770 2001 385 Utility filing fee 385.00	1255 2	,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451 1	,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)385,00	1452	110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		,330	2453	665	Petition to revive - unintentional	
Fee from	1501 1	,330	2501	665	Utility issue fee (or reissue)	
Extra Claims below Fee Paid Total Claims -20** = X	1502	480	2502	240	Design issue fee	
Independent Z = X = X	1503	640	2503	320	Plant issue fee	
Claims - 3** = L A L A A A A A A A A A A A A A A A A	1460	130	1460	130	Petitions to the Commissioner	
	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a submission after final rejection	
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid					(37 CFR 1.129(a))	
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
over original patent	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) Other fee (specify)						
**or number previously paid, if greater, For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						
SUBMITTED BY (Complete (if applicable))						

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Registration No.

(Attorney/Agent)

Telephone

Date

CHECKLIST

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- 6. __PTO/SB/05
- 7. __PTO/SB/08A
- 8. __PTO/SB/17
- 9. __PTO/SB/21
- 10. __TITLE PAGE
- 11. __RELATED APPLICATION
- 12. __FIELD OF THE INVENTION
- 13. __BACKGROUND OF THE INVENTION
- 14. __SUMMARY OF THE INVENTION
- 15. __BRIEF DESCRIPTION OF THE DRAWINGS, (FIGURES 1,2,3,4)
- 16. __DESCRIPTION OF THE PREFERRED EMBODIMENT, (FIGURES 1,2,3,4)
- 17. __CLAIMS (18)
- 18. __ABSTRACT OF THE DISCLOSURE
- 19. __DRAWINGS (2 PAGES)

PTO/SB/21 (02-04)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number TRANSMITTAL Filing Date 03/09/2004 **FORM** First Named Inventor C. NATAY-CURLEY Art Unit (to be used for all correspondence after initial filing) DENTAL MIRROR SCRATCH RES **Examiner Name** Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication 1 Fee Transmittal Form Drawing(s) to Technology Center (TC) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Amendment/Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final **Provisional Application** Proprietary Information Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer **Extension of Time Request** Identify below): Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm **CINDY J. NATAY-CURLEY** Individual name Signature Date 03/09/2004 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name CINDY J. NATAY-CURLEY Date Signature 03/09/2004

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